

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	104	70591	11/18
O.I.P.E. CLASSIFIER	MTN	59	11-22-99
FORMALITY REVIEW	124	71423 7173	12-7-99 3-22-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	7-7-99
2	✓	✓	1-7-02
3	✓	✓	8-9-02
4	✓	✓	1-10-02
5	✓	✓	4-13-02
6	✓	✓	4-8-03
7	0	0	
8	0	0	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
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21	0	0	
22	0	0	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	
27	0	0	
28	0	0	
29	✓	✓	
30	✓	✓	
31	✓	✓	
32	✓	✓	
33	✓	✓	
34	✓	✓	
35	✓	✓	
36	✓	✓	
37	✓	✓	
38	✓	✓	
39	✓	✓	
40	0	0	
41	0	0	
42	0	0	
43	0	0	
44	0	0	
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49	0	0	
50	0	0	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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